

## CalATERS-Global Expense Summary

### REPORT INFORMATION

**Name** Betty T Yee  
**Expense Dates** 08/21/15-08/25/15  
**Form ID** SCS000903452  
**Approver** Thomas J Yowell  
**Start Date/Time** 08/21/15 / 1200  
**End Date/Time** 08/26/15 / 2000  
**Trip Location** Chicago, IL  
**Purpose of Trip** Attend Annual Conference - National Association of State Auditors  
**Authorization #/ Trip #** EO03 / EO03

### REPORT TOTALS

**Report Total** 1162.80 USD  
**Department Paid** 0.00 USD  
**Advance Schedule Amount** 0.00 USD  
**Amount Due Employee** 1162.80 USD

**\*\* Charges are in USD unless otherwise noted**

### EXPENSE DATA SUMMARY

Date	Expense Item	Amount	Payment Type	Country	Ex. Rate	Charge to	USD
08/21/15	O/S Lodging	231.64	Corporate Card	United States (US	1.00		231.64
08/21/15	O/S Internet Charges	1.15	Corporate Card	United States (US	1.00		1.15
08/22/15	O/S Lodging	231.64	Corporate Card	United States (US	1.00		231.64
08/22/15	O/S Internet Charges	1.15	Corporate Card	United States (US	1.00		1.15
08/23/15	O/S Lodging	231.64	Corporate Card	United States (US	1.00		231.64
08/23/15	O/S Internet Charges	1.15	Corporate Card	United States (US	1.00		1.15
08/24/15	O/S Lodging	231.64	Corporate Card	United States (US	1.00		231.64
08/24/15	O/S Internet Charges	1.15	Corporate Card	United States (US	1.00		1.15
08/25/15	O/S Lodging	231.64	Corporate Card	United States (US	1.00		231.64

### Expense Sub-Totals

**O/S Internet Charges** 4.60  
**O/S Lodging** 1158.20

### Review Items - Exceptions and Questions

Text	Response	Policy
Document of Prior Approval required for O/S State Sponsored.	Yes	#A6 DPA required
Was prior approval granted for your attendance at the conference/convention?	Yes	5:3a

## CalATERS-Global Expense Summary

### REPORT INFORMATION

**Name** Betty T Yee  
**Expense Dates** 08/21/15-08/21/15  
**Form ID** TOS000984686  
**Approver** Thomas J Yowell  
**Start Date/Time** 08/21/15 / 1440  
**End Date/Time** 08/26/15 / 2102  
**Trip Location** Chicago, IL  
**Purpose of Trip** Attend the National Association of  
 State Auditors Commtrollers and  
**Authorization #/ Trip #** EO02 / eo02

### REPORT TOTALS

**Report Total** 366.20 USD  
**Department Paid** 366.20 USD  
**Advance Schedule Amount** 0.00 USD  
**Amount Due Employee** 0.00 USD

**\*\* Charges are in USD unless otherwise noted**

### EXPENSE DATA SUMMARY

Date	Expense Item	Amount	Payment Type	Country	Ex. Rate	Charge to	USD
08/21/15	O/S Airfare - Commercial	366.20	Department Paid	United States (US)	1.00		366.20

### Expense Sub-Totals

O/S Airfare - Commercial 366.20

### Review Items - Exceptions and Questions

Text	Response	Policy
Document of Prior Approval required for O/S Regular.	Yes	#A6 DPA required

## CalATERS-Global Expense Summary

### REPORT INFORMATION

**Name** Betty T Yee  
**Expense Dates** 08/13/15-08/13/15  
**Form ID** TEA000903394  
**Approver** Thomas J Yowell  
**Start Date/Time** 08/13/15 / 0700  
**End Date/Time** 08/14/15 / 1300  
**Trip Location** Fresno, CA  
**Purpose of Trip** Meet with education institutions and nonprofit organizations re: VITA  
**Authorization #/ Trip #** /

### REPORT TOTALS

**Report Total** 106.88 USD  
**Department Paid** 0.00 USD  
**Advance Schedule Amount** 0.00 USD  
**Amount Due Employee** 106.88 USD

**\*\* Charges are in USD unless otherwise noted**

### EXPENSE DATA SUMMARY

Date	Expense Item	Amount	Payment Type	Country	Ex. Rate	Charge to	USD
08/13/15	Lodging	106.88	Corporate Card	United States (US)	1.00		106.88

### Expense Sub-Totals

Lodging 106.88

### Review Items - Exceptions and Questions

Text	Response	Policy
Did you obtain prior written approval to exceed the maximum allowed?	Yes	#46a DPA required - Lodging

## CalATERS-Global Expense Summary

### REPORT INFORMATION

**Name** Betty T Yee  
**Expense Dates** 08/10/15-08/10/15  
**Form ID** TEA000903322  
**Approver** Thomas J Yowell  
**Start Date/Time** 08/10/15 / 1200  
**End Date/Time** 08/11/15 / 1300  
**Trip Location** Plumpjack Squaw Valley Inn  
**Purpose of Trip** Attend State Board of Equalization  
 (BOE) Board Meeting  
**Authorization #/ Trip #** /

### REPORT TOTALS

**Report Total** 159.50 USD  
**Department Paid** 0.00 USD  
**Advance Schedule Amount** 0.00 USD  
**Amount Due Employee** 159.50 USD

**\*\* Charges are in USD unless otherwise noted**

### EXPENSE DATA SUMMARY

Date	Expense Item	Amount	Payment Type	Country	Ex. Rate	Charge to	USD
08/10/15	Lodging	159.50	Cash	United States (US)	1.00		159.50

### Expense Sub-Totals

Lodging 159.50

### Review Items - Exceptions and Questions

Text	Response	Policy
Approvers should verify lodging was obtained in a designated high cost county.		46new

Did you obtain prior written approval to exceed the maximum allowed?

No State Board of Equalization Board Meeting - Special conference rate or lower state government rate would not be honored at another property in this high cost area.

#46a DPA required - Lodging